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| PATENT | APPLICATION FEE | DETERMINATION | RECORD |
|--------|-----------------|---------------|--------|
| -      | Effective Oct   | ober 1, 2001  |        |

Application or Docket Number

10-048,086

|   | -              | CLAIMS AS                                 | (Column        |                      | (Colur                        | nn 2)   |             | SMALL EN<br>TYPE    |                                      | OR        | OTHER<br>SMALL      |                        |
|---|----------------|---|----------------|----------------------|-------------------------------|---|-------------|---------------------|--------------------------------------|-----------|---------------------|------------------------|
| ΤΟ  | TAL CLAIMS     |   |                |                      |                               |   |             | RATE                | FEE .                                |           | RATE                | FEE                    |
| FOR   |                | NUMBER FILED                              |                | NUMBER EXTRA         |                               |   | Basic Fee   | •                   | OR                                   | BASIC FEE | 890                 |                        |
| TOTAL CHARGEABLE CLAIMS   |                |   | 20 minus 20= * |                      |                               |   | X\$ 9≖      |                     | OR                                   | X\$18=    |                     |                        |
| INDEPENDENT CLAIMS  |                |   | / minus 3 = *  |                      |                               | ]   | X42=        | •                   | OR                                   | X84≖      |                     |                        |
| MU  | TIPLE DEPEN    | DENT CLAIM PI                             | RESENT         |                      | _                             | +140=   |             | OR                  | +280≖                                |           |                     |                        |
| " If the difference in column 1 is less than zero, enter "0" in column  |                |   |                |                      | olumn 2                       |   | TOTAL       |                     | OR                                   | TOTAL     | 890                 |                        |
| CLAIMS AS AMENDED - PART II   |                |   |                |                      |                               |   |             | SMALL E             | ar:                                  | OR        | OTHER               | 1                      |
|   | <del>/</del> / | (Column 1)                                | <b></b>        | (Colu                |                               | (Column                                       | 3)          | SMALL               |                                      |           | SMACL               |                        |
| ENT A   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | NUM<br>PREVI<br>PAID | BER<br>OUSLY                  | PRESEN<br>EXTRA                               |             | RATE.               | ADDI-<br>TIONAL<br>FEE               | *         | RATE                | ADDI-<br>TIONAL<br>FEE |
| 300   | Total          | · 20                                      | Minus .        | <u>.</u>             | 0                             | -6  |             | X\$ 9=              |                                      | OR        | X\$18=              |                        |
| AMENDMENT   | Independent    | • 3                                       | Minus          | ***                  | <u> </u>                      | 6   | 4           | X42=                |                                      | ÖR        | X84=                | ·                      |
|   | FIRST PRESE    | NTATION OF M                              | JUNPLE DEF     | ENDEN                | CLAIM                         |   | ال          | ÷140~               |                                      | Ċ         | :+280=              |                        |
| 140= OR +280= TOTAL OR ADDIT. FEE OR ADDIT. FEE   |                |   |                |                      |                               |   |             |                     |                                      |           | 4                   |                        |
|   | 1 1 1          | (Column 1)                                |                | (Colu                |                               | (Column                                       | <u>3)</u> : |                     |                                      |           |                     | :                      |
| AMENDMENT B   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | •              | PREVI                | IBER                          | PRESEN<br>EXTRA                               |             | RATE                | ADDI-<br>TIONAL<br>FEE               | -<br>-    | RATE                | ADDI-<br>TIONAL<br>FEE |
| Ş   | Total          | • 20                                      | Minus          | -2                   | 0                             | = .   |             | X\$ 9=              |                                      | OR        | X\$18=              |                        |
| 3   | independent    | • /                                       | Minus          | ***                  | 3                             | <u> -                                    </u> | 4           | X42=                |                                      | OR        | X84=                |                        |
|   | FIRST PRESE    | NTATION OF M                              | ULTIPLE DE     | ENUEN                | COUM                          |   |             | +140=               |                                      | OR        | +280=               |                        |
|   |                |   | •              |                      |                               | •   |             | TOTAL<br>ADOIT, FEE |                                      | OR        | TOTAL<br>ADDIT, FEE |                        |
| <b>I</b>  |                | (Column 1)                                |                | (Colu                | mo 2)                         | (Column                                       | 3)          | <b>-</b> · · ·      |                                      |           | •                   |                        |
| ENTC  |                | CLAIMS REMAINING AFTER AMENDMENT          |                | NUA<br>PREVI         | HEST<br>ABER<br>IOUSLY<br>FOR | PRESEN<br>EXTRA                               |             | RATE                | ADDI-<br>TIONAL<br>FEE               |           | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMEN  | Total          | •   | Minus          | 200                  |                               | -   | _           | X\$ 9=              | ارداد معقد داراد<br>درداد معقد داراد | OR        | X\$18=              |                        |
|   | independent    | •   | Migus          |                      | F 0' 1"                       | -   | 4           | X42=                |                                      | OR        | X84=                |                        |
| F   | FIRST PRESE    | NTATION OF M                              | IULTIPLE DE    | PENDEN               | II CLAIM                      |   |             | +140=               |                                      | OR        | +280=               |                        |
| * If the entry in column 1 is less than the mary in column 2, write "O" in column 3.  |                |   |                |                      |                               |   |             | TOTAL               |                                      | OR        | TOTAL               | -                      |
| one the "Highest Number Productor Paid For IN THIS SPACE is less than 3, enter "3."   |                |   |                |                      |                               |   |             |                     |                                      |           |                     |                        |
| The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. |                |   |                |                      |                               |   |             |                     |                                      |           |                     |                        |